

Western MRS Meeting Notes
September 19th, 2008
AB Tech

Counties Present: Catawba, Gaston, Henderson, Iredell, Lincoln, Rutherford, Swain, Yancey.

Introductions

Announcements – from Raleigh, from you?

In Home Services Discussion

Fact Sheets

Group Care – Children 6 and under

Appla

Announcements

- DCD letters that have come out recently – remember we are sending these all out on the same day now.
- SOC conference in December.

In-Home Services – Improvement Project (Prevent Child Abuse NC)

Prevent Child Abuse, Anne Sayers led a discussion

Overview of project and Purpose of the Discussion

NC's recent federal review brought to light an insufficient service array, particularly during in-home services. We want to address this and have entered into a contract with PCA to: 1) examine the provision and effectiveness of in-home services within county DSS and the availability of needed community based services, 2) make recommendations regarding the policy and/or service changes, and 3) develop a capacity building proposal for consideration to test strategies to increase the effectiveness of CPS in-home services and prevention by selected county DSSs. PCA is reviewing the research literature, and asking counties here, and will bring all this information together and write a report including recommendations and will bring this to Duke endowment. Interested in how evidence based interventions can have an impact on this population

Input and discussion – the framework for discussion was guided by the following questions which were passed out. Responses and discussion did not follow questions precisely, so is included after the list of questions.

PCA's questions

- What is working and not working related to in-home in your agency?
- How do you assess your effectiveness?
- What is provided by In-Home Staff – activities and services?
- What is the content of the home visits with families?
- What type of tools/assistance is provided to staff to help them be effective?
- What is available in your community – particular services, partnership that you feel are producing the outcomes that you want.

- If not as effective as you would like, what would effective look like within your agency and in the community?
- What could be done through this project that would be of assistance.

Discussion

- One county has in home SA/MH assessments done by a private counseling firm.
- One county has no parenting classes.
- Don't really think in-home workers have a clear understanding of what the work is – they see themselves as a case manager, or to provide a certain service, but get wrapped up in meeting required deadlines, etc.
- Multi-generational issues – how do you address these? These are frequently interspersed with MH issues and the current state of MH does not inspire full confidence by DSS staff.
- Collaborative Meetings
 - CFTs with multiple agencies are working, but sometimes hard to achieve.
 - Can't get the heads of agencies all at the table together. Different folks come together for different specific topics, but not an overall/general meeting.
 - Does anyone find the partnership for children boards a helpful place to address and solve issues? Depends – because these only work for children under 5.
 - Can't go to meetings all the time, if there are too many meetings you can't go to all of them and so they ended up just being mostly one agency meeting with a few guests.
 - CCPT in one county is not addressing issues.
- Mental Health Concerns
- MH is changing so fast and the MH workers are a prisoner of their own State requirements and paperwork, that despite individual workers who want to help, they have to do so much of their own paperwork, that it is too hard to keep up.
 - What you were supposed to do last week to get help, is not what you are supposed to do this week. It changes too fast.
 - Different LME's pop up and then go under all the time so you can't keep up with who the agency is in your area.
 - Smoky Mtn MH has been co-locating counselors at DSS and that is helpful, but it is only the first step.
 - Can't get the services that the child or family really needs, they are doing what the parent wants so that they can keep them on as a billing clients.
 - Concerns regarding the ethics of some providers.
 - Communication is often hard – the same words may be used by multiple systems and they mean different things in each system, so each system gets frustrated with each other.
- Statutes do not support in-home services.

- Lack of Services in the Community is crippling.
 - Feels like all we do is enable. We take the places, do the cookie cutter case plans again, can't provide real services because they are not available. Something horrible either happens to a child, or eventually close a case because the family has jumped through all the hoops that are available to jump through.
 - Several counties feel that prescription drugs are now the biggest issues.
 - For in home services some counties feel that whole onus of the case is on the DSS. The DSS in-home worker feels she is carrying the weight of the case, and she has more responsibility than the parents.
 - How about CFTs? Are these helping? Have to put it back on the family and other community partners and then as DSS we have to be open to their ideas.
 - There is only so much the family can do other than agree to take kids to grandma's when they plan to do drugs because there are no services (this may prevent another CPS report for a period of time, but will not really solve the issues.)
 - Does your community know and understand the lack of services? At out level sometimes this gets lost, but if we all talk to everyone we know, then at some point you get to a commissioner, or a good friend of theirs or something, and then you have an ear.
 - If we always say we will wait for the community leaders to "fix it" it is likely that nothing will happen. 100% accountability means doing everything that you can do, even if its not much, if everyone was doing this, something would change, although it might change slowly.
 - If the family does not invest in a plan, or only comes up with things that they have tried and failed at before, with no indication of how this time will be different, will go to court and file a non-secure.
 - The question is "Can the Court be used as a therapeutic agent for change?" It has been in other arenas –but what are the situations where this would work?
 - Have to decide what is the worse trauma – leaving the child in a low level chronic neglect situation, or pulling them out and placing them into foster care.
 - If services are not available in your county, is there a way to get your clients to the services in another county? Transportation is one way that other community members can really step up and help so that DSS doesn't have to do everything.
- Parenting Issues – who has a program that they think is working and if so what is it.
 - Catawba - Nurturing Program, Darkness to Light, etc.
 - Swain – Strengthening Families (but she is not sure how well it is done). Just started Love and Logic on the reservation.

In summary, she is hearing that there is lack of clarity as to what in-home is, the services that the families need is not there, there are no effective parenting interventions, and it might have an impact if we could find a more effective way to use the court.

- Caseload Size (IFPS)
 - Something that a county thought should be examined is the most effective caseload size. IFPS workers have been very successful but they have a small caseload and also a very strict program model. Some counties think that in-home services and IFPS should be more alike with the goal of in-home services to move along faster just as IFPS does.
 - People had some good things to say about IFPS services in the past, however this program has been consistently cut so often that you only can get a referral in about once a year. There are not enough IFPS workers, and when a county had a good worker, that person would be let go, or quit and not be replaced due to finding cuts.
- Lack of Definition of Services - In home services are inconsistent, not really defined. Depends a lot on the individual worker and supervisor. For example, when we came out with the requirement of two contracts a month, many workers thought the whole purpose of the 2nd contact was “to make the second contact” and did not have any real agenda when they went.

Next Steps of the project

- Have a workgroup forming and would like more direct service staff on this workgroup if people would like to participate more in this project.
- PCA is committed to providing some concrete ideas.

Fact Sheets

Nicole will be out west next month, so Holly spoke to the fact sheets. These went out at the end of August.

- All fact sheets are on line for all to see.
- They provide various county specific information and also comparisons to similar counties.

Group Care – Children 6 and Under (as well as 12 and under)

A poll of the room to see if counties knew how many children they had in these situations.

- Some are being placed for treatment issues – are there other options for getting those kids treatment in the community so that the children could live in a family foster home? If there are currently no other options, what would we need to change to make placement in a family foster home a possibility?
 - Counties tried placing them in a lower level of care, and they could not be maintained. There were not services available and school and home placement was disrupted.

- One of the reasons to use Level 3 is for the supervision by the 24/7 hour staff. Some of these kids need that – even at this age.
 - After children were in Level 2 for a certain period of time and not making sufficient progress oftentimes they will not continue to authorize Level 2 placement - they have to bump them up to Level 3.
- If a ton of money fell on NC how could we keep children from being placed in group care.
 - License DSS foster parents as therapeutic foster parents, provide more support for them.
 - Prevention Services to keep kids from getting as bad as they end up by the time they are in group care.
- Has anyone had any success with placement stabilization programs? Holly had this in Illinois – 24/7 you could call someone on call when you were ready to disrupt the placement at 10pm on a Friday.
 - Henderson had it but it was there and gone so fast she can't speak to its success. Buncombe has it as well. Other counties have had some programs that have tried to do this but there were problems – not necessarily with the idea, but perhaps the provider that was running the service – too slow to respond, etc.
- How about kids under 6? What are reasons for this other than keeping them together with sibling?
 - Mental health issues were so extreme and he was so violent that no one else could handle him.
- Sometimes there are mixed messages from the Division regarding keeping kids out of group care and then wanting to know why kids moved.
- Need some clarification – what if a child under 12 or 6 really needs the services available in the group homes because of their needs, is the state still saying that these kids don't need to go into these homes?
 - No, there may be some cases where these kids will need to be put into group care, but want to make sure it is carefully considered, and also to start thinking about what could make a difference in getting them back to family care.
- Some group homes are working on getting individual cottages licensed as foster homes.
- The new rate structure will change several things, and group care will become more expensive.
- One thing we need to be careful of when we claim that we are using group care to place siblings together is that they are actually together. If a sibling group is in the same facility and they are all in different cottages and don't eat together, sleep together, or hardly see each other, then they are not placed together.
- Some confusion about who can negotiate with whom (and who has to initiate the negotiations).
- The private agencies are starting to look at licensing residential foster parents because they understand that the Division is moving away from placing at group homes.

- Need to be more creative ways to serve older kids in group care as well. From a licensing perspective, the Licensing folks in Black Mountain are willing to look at specific rules and see if any of those can be waived in individual situations to best meet the needs of these older children.
- Get everyone to talk about what they can do, not what they can't. Everyone wants to complain and talk about how they can't fix everything, but if each agency/person could do something small, that might add up to be a significant amount of what is needed to address the situation.
- Get the community to understand that these kids are not just DSS's kids. We can keep a lid on violent and/or mentally ill children, but the day they turn 18 if no one would help DSS work with them, they are not DSS's problems anymore – now they are the problem of the whole community. The community will suffer more at the “back end” when this ‘adult’ with severe MH issues ends up on the street and eventually likely incarcerated, whereas if the community had stepped up some 10 years prior and helped the child an investment of fewer resources would have accrued more benefits – for everyone – community as well as the child.
- Careful matching of children's needs with the skills and capabilities of therapeutic foster parents. (Ex – some children need a caregiver that doesn't work, so don't place them with a foster parent who works and not provide someone to take care of the children while he is at work.)
- Have to respect foster parents. Still hearing that foster parents feel like second class citizens. Yes, we give the foster parents money for taking these children, but that does not give us the right to be disrespectful to them.
- Everyone in the entire process needs to be respectful of all the other players.

Other items for discussion/comment

Question for Kirk regarding foster parents speaking in court – wondered if after the change in the law people were seeing any change in foster parents speaking in court.

- Some counties are seeing a difference and more foster parents are going to the court. Some of them are very nervous – have been told that they could write down what they want to say.
- Asked if there could be some kind of workshop for foster parents about this, Kirk is doing this, and can contact him to arrange specifics for you.

October Meetings:

Central: Cabarrus October 29th

Western: AB Tech October 14th

Eastern: Halifax Co DSS October 16th